5 ⁴ k	his form, together wi	9 2005	or <u>Fa</u>	Commissioner P.O. Box 1450 Alexandria, Vi (703) 746-4000	for Patents rginia 22313-1450		
maintenance ree notification	15.		UE FEE and PU rders and notific a) specifying a r	JBLICATION FEE (if re- cation of maintenance fees new correspondence addre	quired). Blocks 1 through 5 s will be mailed to the curren ss; and/or (b) indicating a sep	should be completed where t correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 23850 7590 03/29/2005 ARMSTRONG, KRATZ, QUINTOS, HANSON & BROOKS, LLP 1725 K STREET, NW				papers. Each addition have its own certific	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.		
SUITE 1000				transmitted to the US			
WASHINGTON, DC 20006					(Depositor's name)		
				<u> </u>		(Signature)	
APPLICATION NO.	FILING DATE	T	FIDOT MANGED D	ANIENTOR .	A THORNEY BOOKETING		
08/701,457	08/22/1996		SEIRO YAI		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
TITLE OF INVENTION: ANTENNA FOR TRANSPONDER AND TRANSPONDE					960630 FELEKE2 0000035 087014	5547 57	
			NSI ONDER	01 FC:1501 02 FC:1504 03 FC:8001	14 3	00.00 OP 00.00 OP 30.00 OP	
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	06/29/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
WIMER, MICHAEL C		2828		343-718000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names or agents OR (2) the name registered atto	on the patent front page, list of up to 3 registered patent attorneys alternatively, of a single firm (having as a member a rney or agent) and the names of up to then attorneys or agents. If no name is e will be printed.			
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T					
			**	- · ·	gnee is identified below, the d	locument has been filed for	
PLEASE NOTE: Unless recordation as set forth in		of this form is NO	a substitute for	filing an assignment.			
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNE				filing an assignment. (CITY and STATE OR CO			
(A) NAME OF ASSIGNE		(B) RESIDENCE:	•			
(A) NAME OF ASSIGNE MITSUBISHI M	EE MATERIALS CORPOR	(B RATION	RESIDENCE:	(CITY and STATE OR CO			
(A) NAME OF ASSIGNE MITSUBISHI M Please check the appropriate a 4a. The following fee(s) are e	EE MATERIALS CORPOR assignee category or catego	(B RATION ries (will not be pri	Toky inted on the pater . Payment of Fee	(CITY and STATE OR CO yo, Japan nt): Individual XX (c)(s):	OUNTRY) Corporation or other private gro		
(A) NAME OF ASSIGNE MITSUBISHI M Please check the appropriate at the following fec(s) are expressions as the following fec(s) are expressions.	ATERIALS CORPOR assignee category or catego enclosed:	(B RATION ries (will not be pri	Toky inted on the pater Payment of Fee	(CITY and STATE OR CO YO, Japan nt): Individual XX (it(s): the amount of the fee(s) is e	OUNTRY) Corporation or other private granter control of the contr		
(A) NAME OF ASSIGNE MITSUBISHI M Please check the appropriate at the following fec(s) are expressions as the following fec(s) are expressions.	MATERIALS CORPOR assignee category or categor enclosed: nall entity discount permitte	(B RATION ries (will not be pri 4b d)	Toky inted on the pater Payment of Fee A check in the	(CITY and STATE OR CO yo, Japan nt): Individual XX (c) c(s): the amount of the fee(s) is e credit card. Form PTO-203	Corporation or other private grands of the	oup entity	
(A) NAME OF ASSIGNE MITSUBISHI M Please check the appropriate: 4a. The following fee(s) are e Issue Fee Publication Fee (No sn Advance Order - # of 0	AATERIALS CORPOR assignee category or categor inclosed: nall entity discount permitte Copies 10 from status indicated above	(B RATION ries (will not be pri 4b d)	Toky inted on the pater Payment of Fee A check in the Payment by The Director Deposit Account	(CITY and STATE OR CO yo, Japan nt): Individual XX (cs): the amount of the fee(s) is expected to card. Form PTO-203 r is hereby authorized by thomber UT-2340	Corporation or other private grandlessed. 38 is attached. charge the required fee(s), or (enclose an extra c	credit any overpayment, to opy of this form).	
(A) NAME OF ASSIGNE MITSUBISHI M Please check the appropriate: 4a. The following fee(s) are e Issue Fee Publication Fee (No sn Advance Order - # of 0 5. Change in Entity Status (a. Applicant claims SM	AATERIALS CORPORATERIALS CORPORATERI	(B RATION ries (will not be pri 4b d) 37 CFR 1.27.	Toky inted on the pater . Payment of Fee A check in the Payment by The Director Deposit Accoun	(CITY and STATE OR CO YO, Japan Int): Individual (State of the fee(s)) is the amount of the fee(s) is exceedit card. Form PTO-203 It is hereby authorized by thumber 01-2340 is no longer claiming SMA	Corporation or other private grandlessed. 38 is attached. charge the required fee(s), or (enclose an extra conduction of the cond	credit any overpayment, to opy of this form).	
(A) NAME OF ASSIGNE MITSUBISHI M Please check the appropriate: 4a. The following fee(s) are e Issue Fee Publication Fee (No sn Advance Order - # of 0 5. Change in Entity Status (a. Applicant claims SM	AATERIALS CORPORATERIALS CORPORATERI	(B RATION ries (will not be pri 4b d) 37 CFR 1.27.	Toky inted on the pater . Payment of Fee A check in the Payment by The Director Deposit Accoun	(CITY and STATE OR CO YO, Japan Int): Individual XX (1) Individual XX (2) Interpretation of the fee(s) is expected to card. Form PTO-203 In is hereby authorized by the Number O1 234by It is no longer claiming SMA Into re-apply any previous the result of the proposition of	Corporation or other private grandlessed. 38 is attached. charge the required fee(s), or (enclose an extra c	credit any overpayment, to opy of this form).	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.